



April 28, 2014

Jared Blumenfeld
Regional Administrator
EPA, Region 9
NPDES/DMR, WTR-7
75 Hawthorne Street
San Francisco, CA 94105-3901

**Re: Discharge Monitoring Report – First Quarter 2014 Platforms Ellen, Elly, and Eureka
NPDES Permit CAG280000**

Dear Mr. Blumenfeld:

This letter and its attachments include Discharge Monitoring Reports (DMRs) for the reporting period of January, February, and March 2014 for Beta Offshore Platforms Ellen, Elly and Eureka.

The new General Permit became effective March 1, 2014. This DMR includes the months of January and February, which fall under the previous permit, and the month of March which falls under the new permit. The new permit monthly NPDES requirements are included in the DMR for sampling completed in March. Thus, this DMR includes the old permit limits for the months of January and February and the new permit limits for March.

All produced fluids from Platform Eureka are piped to Platform Elly for processing. Platforms Elly and Ellen are two separate platforms attached by a bridge, thus they have the same latitude and longitude listed in their DMRs. We have submitted separate DMRs for each of the three platforms since there are separate NPDES discharges associated with each platform. Oil production wells are located at Platforms Ellen and Eureka. Platform Elly serves as a processing facility and contains most of the production treatment processes. This is the only platform that may occasionally discharge produced water. There are no drilling related activities or wells on Platform Elly. Production fluids generated at Ellen and Eureka are sent to Elly for further processing and back to Ellen for injection.

Attachment 1: EPA DMR forms (3320-1) for Eureka, Elly and Ellen.

Attachment 2: Attachment 2 are listings of the chemical inventory for miscellaneous discharges (specifically non-contact cooling water) for each platform.

Discharge Overview

Drilling Muds and Cuttings (001):

During this DMR period drilling activities took place on Platform Ellen on Wells, A-21 and A-45. There were no associated drilling discharges at any of the platforms during this DMR period.

Produced Water (002):

Produced water dilution – Platform Elly: On rare occasions when produced water is discharged, often times the discharge may only occur for a few hours or less. In calculating the dilution for each quarter, we use the average produced water daily rate based on the actual barrels of water per day "rate". As an example, if 100 barrels were discharged in one hour, the actual rate would extrapolate to a 2400 barrels of water per day (BWD) "rate", instead of only 100 BWD. This better represents the flow velocity used in the EPA Plume dilution calculation. There were no produced water discharges during this DMR reporting period.

WTCWF (003):

WTCWF generated from Platform Ellen or Eureka would be commingled with the produced water at Platform Elly/Ellen. There were no well treatment, completion and workover fluid jobs performed at any of the platforms during this quarter.

Deck Drains (004):

Platform Ellen's deck drains are commingled with production and sent to Platform Elly. Platform Elly's deck drain volumes are commingled with production at Elly and injected with produced water at Ellen (refer to produced water monitoring requirements in the DMR if discharged). Deck drains on Platform Eureka are sent to a disposal well on Eureka and not discharged.

Sanitary and Domestic Waste (005):

Platforms Ellen and Eureka both operate a United States Coast Guard approved Marine Sanitation Device (MSD). Although these devices are capable of treating both sanitary and domestic waste, some of the domestic waste (as laundry water) is not discharged. At Platform Ellen, these domestic volumes are commingled with production and sent to Platform Elly/Ellen for injection with produced water. The sanitary waste commingles with sinks and shower water and is properly treated and chlorinated through the MSD discharged at Platform Ellen.

Platform Eureka also has sanitary and domestic waste water discharges (refer to the DMR). Domestic waste water (as laundry water) is sent to a disposal well and not discharged at Eureka. Sanitary wastes are treated through a USCG-approved MSD and discharged at Eureka. There are no sanitary/domestic waste discharges at Platform Elly.

Fire water (008):

Fire water at Platforms Ellen and Elly are commingled with deck drains and injected with produced water at Platform Ellen. The fire water and deck drain volumes at Platform Eureka are sent to a disposal well and are not discharged. The fire water was reported as not being chlorinated at all three platforms.

Non-contact Cooling Water (009) - Combined with Excess Sea Water:

Non-contact cooling water (as sea water) can be discharged at all three platforms. Separate discharges occur through separate outfalls for each of the three platforms. Seawater pumps

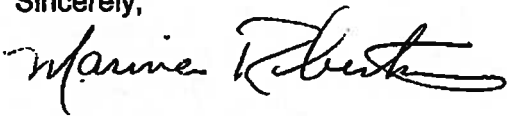
deliver water throughout the platforms for use as non-contact cooling water, marine sanitation device feed water and for sanitary usage supply. Any excess seawater not used for these sources has been previously reported under uncontaminated water in the DMRs under a separate discharge (016). When the non-contact cooling water is discharged it can be combined with the excess seawater discharges at Eureka and Ellen. Since the platforms add low dosages of chlorine treatment to this part of the system, chlorine monitoring has been performed on the chlorinated discharges and if applicable, includes excess seawater in addition to the non-contact cooling water. Thus, the DMR reports the total water discharged for both sources (non-contact cooling water and excess seawater). Both volumes and chlorine results for the combined discharges are listed in the DMR under non-contact cooling water for Eureka and Ellen. Elly has only non-contact cooling water. Any separate uncontaminated discharges that occur, will continue to be reported independently under discharge (016) in the DMR.

Permit limits for chlorine applicable to the non-contact cooling water were released in the March 2014 permit modification. The new required quarterly sampling will be included in the next DMR. The chemical inventory for non-contact cooling water (Attachment 2) was based on Operations' daily estimates using a Hach color wheel chlorine test kit.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 U.S.C. & 1001 and 33 U.S.C. & 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)

Should you have any questions or require any additional information, please contact me at (562) 628-1526.

Sincerely,



Marina Robertson
HSE Manager

cc (via email):

Ms. Susan Zaleski
Mr. James Salmons
Bureau of Safety and Environmental
Enforcement
770 Paseo Camarillo
Camarillo, CA 93010-6064

Ms. Alison Dettmer
Manager, Energy and Ocean Resources Unit
California Coastal Commission
45 Fremont, Suite 2000
San Francisco, CA 94105-2219

Platform Elly

Attachment 1

**EPA DMR
PERMIT NO. CAG280000**

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.


001,003,019
DISCHARGE NO.

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 116° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

Approved Form
OMB No. 2000-0015
DRILLING FLUIDS AND DRILL CUTTINGS (001)
WELL TREATMENT, COMPLETION
AND WORKOVER FLUIDS (003)
EXCESS CEMENT SLURRY (019)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type								
		Average	Maximum	Units	Minimum	Average	Maximum				Units							
DRILLING FLUIDS MONITORING Well # N / A	Sample Measurement		No Discharge	Barrels/ Well														
January - March	Permit Requirement		Report						1/well 1/day	Estimate								
DRILL CUTTINGS MONITORING Well # N / A	Sample Measurement		No Discharge	Barrels/ Month														
January - March	Permit Requirement		Report						1/well 1/day	Estimate								
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS MONITORING	Sample Measurement		No Discharge	Barrels / Job														
January - March	Permit Requirement		Report						1 / job	Estimate								
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS Chemical Inventory	Sample Measurement				No Discharge			0	1/month	List								
January - March	Permit Requirement				Report				1/month	List								
EXCESS CEMENT SLURRY FLOW MONITORING	Sample Measurement		No Discharge	Monthly Average bbl/day														
January - March	Permit Requirement		Report						1/month	Estimate								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE NONPENALTY PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS, \$250,000 U.S.C. & 1001 AND 33 U.S.C. & 1319. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 6 YEARS.</small>						TELEPHONE		DATE								
Steve Liles Vice President, Manager of Operations																		
TYPED OR PRINTED																		
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		 Marina Robertson, HSE Manager						(562) 628-1526		04 22 2014								
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR								

There are no wells or drilling activities at Platform Elly.

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

002
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From:	14	01	01	To:	14 03 31

PRODUCED WATER (002)
(commingled with Platform Eureka & Ellen)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type	
		Average	Maximum	Units	Minimum	Average	Maximum				Units
PRODUCED WATER FLOW RATE (commingled with Eureka and Ellen) January	Sample Measurement	0		Monthly Average bb/Day					0	1/day	Estimate
	Permit Requirement									1/day	Estimate
February	Sample Measurement	0		Monthly Average bb/Day							
	Permit Requirement									1/day	Estimate
March	Sample Measurement	0		Monthly Average bb/Day							
	Permit Requirement									1/day	Estimate
QUARTERLY AVERAGE Volume 01/01/14 - 03/31/14		No Discharge		Quarterly Average bb/Day					0	1/quarter	Estimate
										1/quarter	Estimate
ANNUAL CUMULATIVE Volume ¹ 03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/ Year					0	1/quarter	Estimate
	Permit ¹		10,950,000 *							1/quarter	Estimate
	Requirement										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1910. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$5000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.					TELEPHONE		DATE		
Steve Liles Vice President, Manager of Operations							(562) 628-1526		04 22 2014		
TYPED OR PRINTED							Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT		A/see Code Number		
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.) ¹ Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015. Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded. * The total annual cumulative volume limit is a combined limit of produced water volumes discharged from Platforms Ellen, Elly, and Eureka as listed in the NPDES permit. The 'sample measurement' listed is a combined total for Ellen, Elly, and Eureka.											

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

002
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elty
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

PRODUCED WATER (002)
Enforceable Limits

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type								
		Average	Maximum	Units	Minimum	Average	Maximum				Units							
PRODUCED WATER OIL & GREASE	Sample Measurement					No Discharge	No Discharge											
	Permit Requirement					29.0	42.0	mg/L	1/week	Grab/Composite								
January	Sample Measurement					No Discharge	No Discharge											
	Permit Requirement					29.0	42.0	mg/L	1/week	Grab/Composite								
February	Sample Measurement					No Discharge	No Discharge											
	Permit Requirement					29.0	42.0	mg/L	1/week	Grab/Composite								
March	Sample Measurement					No Discharge	No Discharge											
	Permit Requirement					29.0	42.0	mg/L	1/week	Grab/Composite								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY KNOWLEDGE OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. & 1501 AND 30 U.S.C. & 1701. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</small>						TELEPHONE		DATE								
Steve Liles Vice President, Manager of Operations									(562) 628-1526		04 22 2014							
TYPED OR PRINTED										MONTH/DAY/YEAR								
		 Marina Robertson, HSE Manager						Area Code Number										
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT																

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Oil and grease sampling is weekly during discharge (no sample during weeks with no produced water discharges).

¹ Results are post-dilution, and no limits listed are applicable as listed in the new permit effective March, 2014, Appendix B.

Results showing NOD(B): below MDL. The maximum value of the analytical result is less than the laboratory's MDL (below detection level).

Results showing NOD(Q): equal to or above the MDL, but less than the ML or PQL.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

004
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025"LAT., 118° 07' 37.52"LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	01	01	To: 14	03	31

DECK DRAINAGE (004)
(Commingled with produced water)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type											
		Average	Units	Minimum	Average	Maximum	Units														
DECK DRAINAGE VOLUME-FLOW RATE (commingled with produced water) January	Sample Measurement	N/A	Mo. Avg. bbl/day																		
	Permit Requirement	Report						1/month	Estimate												
February	Sample Measurement	N/A	Mo. Avg. bbl/day						1/month	Estimate											
	Permit Requirement	Report																			
March	Sample Measurement	N/A	Mo. Avg. bbl/day						1/month	Estimate											
	Permit Requirement	Report																			
DECK DRAINAGE FREE OIL January	Sample Measurement	N/A	# Days Sheen Observed	N/A					1/day	Visual - Daylight											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.																	
February	Sample Measurement	N/A	# Days Sheen Observed	N/A					1/day	Visual - Daylight											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.																	
March	Sample Measurement	N/A	# Days Sheen Observed	N/A					1/day	Visual - Daylight											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.																	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1051 AND 28 U.S.C. § 1315. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 3 YEARS)						TELEPHONE		DATE											
Steve Liles Vice President, Manager of Operations																					
TYPED OR PRINTED																					
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		 Marina Robertson, HSE Manager Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR											

N/A: Deck drains are commingled with produced water (refer to produced water reporting requirements).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTES (005)
(Domestic water commingled with Production)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type					
		Average	Maximum	Units	Minimum	Average	Maximum	Units								
SANITARY WASTES FLOW RATE	Sample Measurement	N/A		Monthly Average bbl/day												
	Permit Requirement	Report							1/month	Estimate						
January	Sample Measurement	N/A		Monthly Average bbl/day												
	Permit Requirement	Report							1/month	Estimate						
February	Sample Measurement	N/A		Monthly Average bbl/day												
	Permit Requirement	Report							1/month	Estimate						
March	Sample Measurement	N/A		Monthly Average bbl/day												
	Permit Requirement	Report							1/month	Estimate						
SANITARY WASTES FOAM & FLOATING SOLIDS	Sample Measurement		N/A	# days observed	N/A											
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight						
January	Sample Measurement		N/A	# days observed	N/A											
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight						
February	Sample Measurement		N/A	# days observed	N/A											
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight						
March	Sample Measurement		N/A	# days observed	N/A											
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY KNOWLEDGE OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR OBTAINING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. (SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1910. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND/OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.)							TELEPHONE		DATE					
Steve Liles Vice President, Manager of Operations		 Marina Robertson, HSE Manager							(562) 628-1526		04 22 2014					
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code Number		MONTH/DAY/YEAR					

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N/A : There are no discharges at Platform Elly. Sanitary volumes are discharged at Platform Ellen (refer to Plt. Ellen DMR).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	01	01	To: 14	03	31

SANITARY & DOMESTIC WASTES (005)
(Domestic water commingled with Production)

NOTE: Read Instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
SANITARY WASTE RESIDUAL CHLORINE	Sample Measurement				N/A	N/A	N/A	mg/l			
	Permit Requirement				1 mg/l	N/A	10 mg/l			Monthly	Grab
February	Sample Measurement				N/A	N/A	N/A	mg/l			
	Permit Requirement				1 mg/l	N/A	10 mg/l			Monthly	Grab
March	Sample Measurement				N/A	N/A	N/A	mg/l			
	Permit Requirement				1 mg/l	N/A	10 mg/l			Monthly	Grab
DOMESTIC WASTE, FLOW RATE	Sample Measurement	N/A		Monthly Average							
	Permit Requirement	Report		bb/day						1/month	Estimate
DOMESTIC WASTE FOAM & FLOATING SOLIDS	Sample Measurement		N/A	# days	N/A						
	Permit Requirement		None	observed	No foam or floating solids in the receiving waters.					1/day	Visual - Daylight
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR VIOLATIONS UNDER 18 U.S.C. § 1001 AND 33 U.S.C. § 1910. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)				TELEPHONE		DATE			
Steve Liles Vice President, Manager of Operations		 Marina Robertson, HSE Manager				(562) 628-1526		04 22 2014			
TYPED OR PRINTED						Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT		Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N/A : There are no discharges at Platform Elly. Sanitary volumes are discharged at Platform Ellen (refer to Plt. Ellen DMR).

¹ Domestic water, as laundry, is commingled with produced water and injected (refer to Produced Water). Domestic water from showers and sinks is commingled with sanitary at Platform Ellen (refer to Platform Ellen DMR).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

008
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

FIRE CONTROL WATER (008)
(Commingled with production)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type					
		Average	Units	Minimum	Average	Maximum	Units								
FIRE CONTROL SYSTEM TEST WATER (008) - FOAM FLOATING SOLIDS January	Sample Measurement	None	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
February	Sample Measurement	None	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
March	Sample Measurement	None	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
FIRE CONTROL SYSTEM TEST WATER (008) CHLORINE, January - March	Sample Measurement				Monthly Average	Daily Maximum									
	Permit Requirement				N / A	N / A	ug/L								
	Sample Measurement														
	Permit Requirement								1/month	Grab					
FIRE CONTROL SYSTEM TEST WATER Chemical Inventory, January - March	Sample Measurement			N / A				ug/L	1/month	List					
	Permit Requirement			Report					1/month	List					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY TRAINED AND EVALUATED, HAVE BEEN ASSIGNED TO OBTAIN, REVIEW, AND REPORT THE INFORMATION SUBMITTED. BASED ON MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1051 AND 33 U.S.C. § 1319. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.						TELEPHONE		DATE					
Steve Lies Vice President, Manager of Operations		 Marina Robertson, HSE Manager						(562) 628-1526		04 22 2014					
TYPED OR PRINTED								Area Code Number		MONTH/DAY/YEAR					

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N / A: Fire water is commingled with deck drains and produced water and is injected. Small amounts may be discharged overboard during fire water system testing.
The firewater is not chlorinated or chemically treated. Refer to produced water discharges.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NON-CONTACT COOLING WATER (009)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type						
		Average	Units	Minimum	Average	Maximum	Units									
NON-CONTACT COOLING WATER (009) - FLOW VOLUME, January	Sample Measurement	5,143	Barrels/Day					0	1/month	Estimate						
	Permit Requirement	Report							1/month	Estimate						
February	Sample Measurement	5,143	Barrels/Day					0	1/month	Estimate						
	Permit Requirement	Report							1/month	Estimate						
March	Sample Measurement	5,143	Barrels/Day					0	1/month	Estimate						
	Permit Requirement	Report							1/month	Estimate						
NON-CONTACT COOLING WATER (009) FOAM/FLOATING SOLIDS January	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight						
February	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight						
March	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. (SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 191). PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$1000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)</small>						TELEPHONE		DATE						
Steve Liles Vice President, Manager of Operations									(562) 628-1526							
									04 22 2014							
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR						

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Non-Contact Cooling water is discharged separately.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NON-CONTACT COOLING WATER (009)

NOTE: Read Instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Units	Minimum	Monthly Average	Daily Maximum	Units			
NON-CONTACT COOLING WATER (009) - CHLORINE ¹	Sample Measurement				N/A	N/A	mg/L			
January	Permit Requirement				N/A	N/A			1/quarter ²	Grab
February	Sample Measurement				N/A	N/A	mg/L			
	Permit Requirement				N/A	N/A			1/quarter ²	Grab
March ²	Sample Measurement				N/A	N/A	mg/L			
	Permit Requirement				0.00585	0.0102			1/quarter ²	Grab
NON-CONTACT COOLING WATER (009) CHEMICAL INVENTORY					See Attachment #2 Chemical Inventory			0	1/month	List
January - March					Report				1/month	List
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND ILLUSTRATE THE INFORMATION SUBMITTED. BASED ON MY REVIEW OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 519c. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND/OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.							TELEPHONE	DATE	
Steve Liles Vice President, Manager of Operations								(562) 628-1526	04 22 2014	
TYPED OR PRINTED								Area Code	MONTH/DAY/YEAR	
Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT								Area Code	MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Chlorine values reported above are post-dilution per EPA Plumes UM. Chlorine limits are post-dilution as listed in the new permit modified March 1, 2014, Appendix C.

² Permit limits were released in the March 2014 permit modification.

N/A: The required quarterly chlorine sampling will be performed in April.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved Form
OMB No. 2000-0015

CAG280000
PERMIT NO.


006,007,010,011,012,013,014
DISCHARGE NO.

Blowout Preventer Fluids
Desalination Unit
Ballast/Storage Displacement
Bilge Water
Boiler Blowdown
Test Fluids
Diatomaceous Earth Filter Media

NOTE: Read instructions before completing this form.

Beta Platform Eily
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type					
		Average	Maximum	Units	Minimum	Average	Maximum	Units								
(006) Blowout Preventer Fluids FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge											
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water					
(007) Desalination Unit FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge											
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water					
(010) Ballast/Storage Displacement Water - FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge											
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight					
(011) Bilge Water FLOW RATE January - March	Sample Measurement			Monthly Average bbl/day	No Discharge											
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate					
(012) Boiler Blowdown FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge											
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water					
(013) Test Fluids * FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge											
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight					
(014) Diatomaceous Earth Filter Media FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge											
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 36 U.S.C. § 1016. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)							TELEPHONE		DATE					
Steve Liles Vice President, Manager of Operations		 Marina Robertson, HSE Manager							(562) 628-1526		04 22 2014					
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							Area Code Number		MONTH/DAY/YEAR					

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved Form
OMB No. 2000-0015

CAG260000
PERMIT NO.


015, 016, 017, 018, 020, 021
DISCHARGE NO.

Beta Platform Elly
LOCATION: 33° 35' .025" LAT., 118° 07' 37.52" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

Bulk Water Transfer Overflow
Uncontaminated Water
Water Flooding Discharges
Laboratory Wastes (Commingled w/ produced water)
Muds, Cuttings, Cement at Sea
Hydrotest Water

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type		
		Average	Units	Minimum	Average	Maximum	Units					
(015) Bulk Transfer Water Overflow FOAM, FLOATING SOLIDS January - March	Sample Measurement			No floating solids in the receiving water.				0	1/month 1/dischARGE	Visual Rec. Water		
	Permit Requirement			No foam, in other than trace amounts, in the receiving water.								
(016) Uncontaminated Water FOAM, FLOATING SOLIDS January - March	Sample Measurement			No floating solids in the receiving water.				0	1/month 1/dischARGE	Visual Rec. Water		
	Permit Requirement			No foam, in other than trace amounts, in the receiving water.								
(017) Water Flooding Discharges FREE OIL, FOAM, FLOATING SOLIDS* January - March	Sample Measurement			No Discharge					1/month 1/dischARGE	Visual Rec. Water		
	Permit Requirement			No free oil or floating solids in the receiving water.								
(018) Laboratory Wastes FREE OIL, FOAM, FLOATING SOLIDS (commingled with produced water) January - March	Sample Measurement			N/A (refer to produced water requirements)				0	1/month 1/dischARGE	Visual Rec. Water		
	Permit Requirement			No free oil or floating solids in the receiving water.								
(020) Muds, Cuttings, Cement at Sea Floor FLOOR FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			No Discharge					1/month 1/dischARGE	Visual Rec. Water		
	Permit Requirement			No free oil or floating solids in the receiving water.								
(021) Hydrotest Water * FLOW RATE / FREE OIL, FOAM FLOATING SOLIDS January - March	Sample Measurement		Monthly Average bbl/day	No Discharge					1/month 1/dischARGE	Estimate / Visual Daylight		
	Permit Requirement	Report		No free oil or floating solids in the receiving water.								
(021) HYDROTEST WATER CHLORINE January - March	Sample Measurement				No Discharge	No Discharge	ug/L		1/month 1/dischARGE	Grab		
	Permit Requirement				N/A	N/A						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY BELIEF OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS, 800 U.S.C. § 1051 AND 30 U.S.C. § 1918. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.					TELEPHONE		DATE			
Steve Liles Vice President, Manager of Operations		 Marina Robertson, HSE Manager					(562) 628-1526		04 22 2014			
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR			

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

022
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Elly
LOCATION: 33° 35' .025"LAT., 118° 07' 37.52"LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

H2S Gas Processing Waste Water

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type						
		Average	Maximum	Units	Minimum	Average	Maximum	Units									
(022) H2S Gas Processing Waste Water FLOW RATE	Sample Measurement			Monthly Average bbl/day						1/discharge	Estimate						
	Permit Requirement	Report								1/discharge	Estimate						
(022) H2S Gas Processing Waste Water FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement				No Discharge					1/discharge	Visual - Daylight						
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Visual - Daylight						
Surfactants, Detergents, Dispersants,	Sample Measurement				Minimized			0									
	Permit Requirement				Minimize												
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY KNOWLEDGE OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1001 AND 33 U.S.C. § 1916. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$100,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.				TELEPHONE		DATE									
Steve Liles Vice President, Manager of Operations																	
TYPED OR PRINTED																	
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		 Marina Robertson, HSE Manager				(562) 628-1526		04 22 2014									
						Area Code Number		MONTH/DAY/YEAR									

¹ Any detergents, dispersants, or surfactants used are either included with sanitary and domestic discharges or produced water discharges.

Attachment 2

Chemical Inventory

**ATTACHMENT 2
PLATFORM ELLY
MISCELLANEOUS DISCHARGES
CHEMICAL INVENTORY
January 1, 2014 through March 31, 2014**

<u>Fluid Type</u>	<u>Volume</u> (Monthly avg bbls per day)	<u>Product Name</u>	<u>Estimated Chemical Quantity</u> (Monthly avg gal per day)	<u>Average End-of-Pipe ¹ Concentration</u> (mg/l)
009 Non-contact Cooling Water				
January	5,143	Chlorine	0.13	0.6
February	5,143	Chlorine	0.09	0.4
March	5,143	Chlorine	0.15	0.7
008 Fire Control System Water	N / A	None	None	None
013 Test Fluids	No Discharge	No Discharge	None	None
017 Water Flooding Discharges	No Discharge	No Discharge	None	None
021 Hydrotest Water	No Discharge	No Discharge	None	None

¹ Chemical quantity for non-contact cooling water calculated with Operations daily monitoring results using a non-EPA chlorine test method (Hach DPD Color Wheel). The chlorine concentrations are the same for Elly and Ellen since Ellen's seawater pump supplies the non-contact cooling water to Elly.

N / A: Not chlorinated

Platform Ellen

Attachment 1

**EPA DMR
PERMIT NO. CAG280000**

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From:	14	01	To:	14	03

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type									
		Average	Maximum	Units	Minimum	Average	Maximum	Units												
DRILLING FLUIDS VOLUME	Sample Measurement		No Discharge	Barrels/ Well																
Well # N/A	Permit Requirement		Report							1/well 1/day	Estimate									
January	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
February	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
March	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
Quarterly Total	Sample Measurement		0	Barrels/ Quarter					0											
01/01/14 - 03/31/14	Permit Requirement		Report																	
Annual Cumulative Volume Limit 1	Sample Measurement		0	Barrels/ Year					0											
03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Permit Requirement		49,950 *																	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED AS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 20 U.S.C. § 1519. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINE UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)							TELEPHONE		DATE									
Steve Liles Vice President, Manager of Operations																				
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code		MONTH/DAY/YEAR									

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* The total annual cumulative volume limit is a combined limit of drilling fluid volumes from both Platforms Ellen and Elly, as listed in the permit.

Drilling activities took place during this DMR period, however there were no associated drilling discharges.

1 Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type														
		Average	Maximum	Units	Minimum	Average	Maximum	Units																	
DRILL CUTTINGS VOLUME Well # N / A	Sample Measurement		No Discharge	Barrels/ Month																					
	Permit Requirement		Report							1/well 1/day	Estimate Grab														
January	Sample Measurement		No Discharge	Barrels/ Month																					
	Permit Requirement		Report							1/well 1/day	Estimate Grab														
February	Sample Measurement		No Discharge	Barrels/ Month																					
	Permit Requirement		Report							1/well 1/day	Estimate Grab														
March	Sample Measurement		No Discharge	Barrels/ Month																					
	Permit Requirement		Report							1/well 1/day	Estimate Grab														
Annual Cumulative Volume Limit 1 03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/ Year					0																
	Permit Requirement		18,150 *																						
DRILL FLUIDS/CUTTINGS FREE OIL	Sample Measurement		No Discharge	Barrels/ Month	No Discharge			# Days Sheen Observed																	
	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual														
January	Sample Measurement		No Discharge	Barrels/ Month	No Discharge			# Days Sheen Observed																	
	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual														
February	Sample Measurement		No Discharge	Barrels/ Month	No Discharge			# Days Sheen Observed																	
	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual														
March	Sample Measurement		No Discharge	Barrels/ Month	No Discharge			# Days Sheen Observed																	
	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual														
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1301 AND 23 U.S.C. § 1316. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 3 YEARS)						TELEPHONE		DATE															
Steve Liles Vice President, Manager of Operations										(562) 628-1526		04 22 2014													
TYPED OR PRINTED										Area Code Number		MONTH/DAY/YEAR													
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT																							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* The total annual cumulative volume limit is a combined limit of drilling fluid volumes from both Platforms Ellen and Eily, as listed in the permit.
Drilling activities took place during this DMR period, however there were no associated drilling discharges.

1 Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 58.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration		NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Maximum	Units			
DRILLING FLUIDS TOXICITY WELL No.	Sample Measurement				N/A	% by Volume			
	Permit Requirement				LC50 > 3% SPP			(0-80%) Well Footage	Grab
DRILLING FLUIDS TOXICITY WELL No.	Sample Measurement				N/A	% by Volume			
	Permit Requirement				LC50 > 3% SPP			(80-100%) Well Footage	Grab
BARITE MERCURY	Sample Measurement				N/A	mg / kg			
	Permit Requirement				1 mg / kg			Stock Barite	Grab
BARITE CADMIUM	Sample Measurement				N/A	mg / kg			
	Permit Requirement				3 mg / kg			Stock Barite	Grab
DRILL FLUIDS CHEMICAL INVENTORY WELL No.	Sample Measurement				N/A				
	Permit Requirement				Report			Each Mud System	
No. DAYS DISCHARGE FOR EACH DRILLING FLUID	Sample Measurement				N/A				
	Permit Requirement				Report			# Days Each	
PROHIBITED DISCHARGE 1. Oil-based Fluids 2. Diesel Oil 3. Non-aqueous based drilling fluids or cuttings					No Discharge			N/A	
					No Discharge			N/A	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 603 16 U.S.C. & 1051 AND 35 U.S.C. & 1349. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</small>				TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations						(562) 628-1526		04 22 2014	
TYPED OR PRINTED						Area Code Number		MONTH/DAY/YEAR	
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N /A: No discharge of drilling fluids.

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

002
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

PRODUCED WATER (002)
(Commingled at Platform Elly)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
PRODUCED WATER Flow Rate	Sample Measurement	N/A		Monthly Average bbl/Day							
January - March	Permit Requirement									1/day	Estimate
QUARTERLY AVERAGE Volume		N/A		Quarterly Average bbl/Day						1/quarter	Estimate
ANNUAL CUMULATIVE Volume	Sample Measurement		N/A	Barrels/Year							
03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Permit Requirement		10,950,000 *								
PRODUCED WATER Oil & Grease	Sample Measurement					N/A	N/A	mg/L			
	Permit Requirement					29.0	42.0			1/week	Grab
Enforceable Limits:											
PRODUCED WATER QUARTERLY CONSTITUENTS											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. (SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1910. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.)							TELEPHONE	DATE		
Steve Liles Vice President, Manager of Operations	 Marina Robertson, HSE Manager							(562) 628-1526	04 22 2014		
TYPED OR PRINTED	Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code Number	MONTH/DAY/YEAR		

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.
N/A: There was no produced water discharge at Platform Ellen. All produced water for the quarter sent to Elly for processing, then back to Ellen and injected.

* The total annual cumulative volume limit is a combined limit of produced water volumes from Platforms Ellen, Elly, and Eureka.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

003
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

**WELL TREATMENT, COMPLETION
AND WORKOVER FLUIDS (003)**
(commingled with produced water at Pit Elly)
NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum			
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS , FLOW	Sample Measurement		N/A	Barrels / Job						
	Permit Requirement		Report							
January	Sample Measurement		N/A	Barrels / Job						
	Permit Requirement		Report							
February	Sample Measurement		N/A	Barrels / Job						
	Permit Requirement		Report							
March	Sample Measurement		N/A	Barrels / Job						
	Permit Requirement		Report							
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS , OIL AND GREASE						MONTHLY AVERAGE	DAILY MAXIMUM			
January	Sample Measurement					N/A	N/A	mg/L		
	Permit Requirement					29.0	42.0		1/job	Grab
February	Sample Measurement					N/A	N/A	mg/L		
	Permit Requirement					29.0	42.0		1/job	Grab
March	Sample Measurement					N/A	N/A	mg/L		
	Permit Requirement					29.0	42.0		1/job	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 50 U.S.C. § 1010, PENALIZED UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$15,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 3 YEARS.					TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations										
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ When present, all WTCWF are commingled with production and sent to Platform Elly (refer to Pit Elly DMR).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

003
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

**WELL TREATMENT, COMPLETION
AND WORKOVER FLUIDS (003)**
(commingled with produced water at Pit Elly)
NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS , TYPE AND TOTAL NUMBER OF JOBS January - March	Sample Measurement		0	Barrels / Job							
	Permit Requirement		Report								
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS , STATIC SHEEN January - March	Sample Measurement				N / A			# Times Sheen Observed			
	Permit Requirement				Negative Static Sheen Test - # Times observed-None				1/discharge	Grab	
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS Chemical Inventory March	Sample Measurement				N / A			0	1/month	List	
	Permit Requirement				Report				1/month	List	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A WRITTEN DESIGN TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED, BASED ON MY EMPLOY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1919. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.						TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations											
TYPED OR PRINTED								Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ When present, all WTCWF are commingled with production and sent to Platform Elly (refer to Pit Elly DMR).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG250000
PERMIT NO.

004
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DECK DRAINAGE (004)
(commingled with produced water at Pit Eily)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type								
		Average	Units	Minimum	Average	Maximum	Units											
DECK DRAINAGE VOLUME-FLOW RATE ¹	Sample Measurement	N/A	Mo. Avg. bbl/day															
	Permit Requirement	Report							1/month	Estimate								
January	Sample Measurement	N/A	Mo. Avg. bbl/day															
	Permit Requirement	Report							1/month	Estimate								
February	Sample Measurement	N/A	Mo. Avg. bbl/day															
	Permit Requirement	Report							1/month	Estimate								
March	Sample Measurement	N/A	Mo. Avg. bbl/day															
	Permit Requirement	Report							1/month	Estimate								
DECK DRAINAGE FREE OIL	Sample Measurement	N/A	# Days Sheen Observed	N/A														
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight								
January	Sample Measurement	N/A	# Days Sheen Observed	N/A														
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight								
February	Sample Measurement	N/A	# Days Sheen Observed	N/A														
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight								
March	Sample Measurement	N/A	# Days Sheen Observed	N/A														
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 15 U.S.C. § 1051 AND 33 U.S.C. § 1916. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)</small>						TELEPHONE		DATE								
Steve Liles Vice President, Manager of Operations																		
TYPED OR PRINTED		 Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR								

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Deck drain volumes are comingled with production and not discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTES (005)
(Domestic waste commingled with produced water at Ely)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type							
		Average	Maximum	Units	Minimum	Average	Maximum	Units										
SANITARY WASTE , FLOW RATE	Sample Measurement	87.0		Monthly					0	1/day	Estimate							
	Permit Requirement	Report		Average bbl/day						1/month	Estimate							
January	Sample Measurement	99.0		Monthly					0	1/day	Estimate							
	Permit Requirement	Report		Average bbl/day						1/month	Estimate							
February	Sample Measurement	80.0		Monthly					0	1/day	Estimate							
	Permit Requirement	Report		Average bbl/day						1/month	Estimate							
March	Sample Measurement			Monthly					0	1/day	Estimate							
	Permit Requirement	Report		Average bbl/day						1/month	Estimate							
SANITARY WASTES FOAM & FLOATING SOLIDS	Sample Measurement		0	# days	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None	observed	No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
January	Sample Measurement		0	# days	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None	observed	No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
February	Sample Measurement		0	# days	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None	observed	No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
March	Sample Measurement		0	# days	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None	observed	No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THIS SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1919. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.)					TELEPHONE		DATE									
Steve Liles Vice President, Manager of Operations									(562) 628-1526									
TYPED OR PRINTED									04 22 2014									
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR									
		 Marina Robertson, HSE Manager																

¹ Sanitary includes restroom sinks, showers and toilets.

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTES (005)
(Domestic waste commingled with produced water at Eily)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average		Minimum	Average	Maximum	Units			
SANITARY WASTE RESIDUAL CHLORINE ¹	Sample Measurement			N/A	N/A	N/A		0		
	Permit Requirement			1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
January	Sample Measurement			N/A	N/A	N/A		0		
	Permit Requirement			1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
February	Sample Measurement			N/A	N/A	N/A		0		
	Permit Requirement			1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
March	Sample Measurement			N/A	N/A	N/A		0		
	Permit Requirement			1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
DOMESTIC WASTE (as laundry) FLOW RATE	Sample Measurement	N/A	Monthly						1/day	Estimate
	Permit Requirement	Report	Average bbl/day						1/month	Estimate
January - March	Sample Measurement									
	Permit Requirement									
DOMESTIC WASTES FOAM & FLOATING SOLIDS	Sample Measurement	N/A	# days observed	N/A					1/day	Visual - Daylight
	Permit Requirement	None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight
January - March	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
	Sample Measurement									
	Permit Requirement									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY TRAINED AND EVALUATED, HAVE BEEN PROVIDED TO OBTAIN, REVIEW, AND REPORT THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR OBTAINING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1315. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.					TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations						(562) 628-1526		04 22 2014		
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ The sewage treatment unit is a marine sanitation device that complies with pollution control standards and regulations under Section 312 of the Clean Water Act. Thus, it is deemed to be in compliance with permit limitations for sanitary waste discharges (as per Condition II.E.1 Footnote 2 of CAG280000). Occasional chlorine tests are performed to ensure proper operation of the device.

N/A: Domestic laundry water is commingled with production and sent to Platform Eily for injection at Ellen (refer to Plt. Ellen DMR).

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

008
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

FIRE CONTROL WATER (008)
(commingled with deck drains)

NOTE: Read Instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type						
		Average	Units	Minimum	Average	Maximum	Units									
FIRE CONTROL SYSTEM TEST WATER (008) - FOAM, FLOATING SOLIDS January	Sample Measurement	N/A	# Days Observed	N/A				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight						
February	Sample Measurement	N/A	# Days Observed	N/A				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight						
March	Sample Measurement	N/A	# Days Observed	N/A				0	1/day	Visual - Daylight						
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight						
FIRE CONTROL SYSTEM TEST WATER (008) CHLORINE January - March					Monthly Average	Daily Maximum										
	Sample Measurement				N/A	N/A	ug/L	0	1/month	Grab						
	Permit Requirement				N/A	N/A			1/month	Grab						
FIRE CONTROL SYSTEM TEST WATER Chemical Inventory January - March	Sample Measurement			N/A					1/month	List						
	Permit Requirement			Report					1/month	List						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1051 AND 33 U.S.C. § 1915. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND/OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.)</small>					TELEPHONE		DATE							
Steve Liles Vice President, Manager of Operations								(562) 628-1526		04 22 2014						
TYPED OR PRINTED								 Marina Robertson, HSE Manager		MONTH/DAY/YEAR						
							Area Code Number									

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N/A: Fire water is comingled with deck drains and produced water at Platform Ely and is injected at Ellen. The firewater is not chlorinated or chemically treated.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NON-CONTACT COOLING WATER (009)
(combined with excess seawater)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type																
		Average	Units	Minimum	Average	Maximum	Units																			
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER FLOW VOLUME January	Sample Measurement	36,000	Barrels/ Day					0	1/month	Estimate																
	Permit Requirement	Report							1/month	Estimate																
	Sample Measurement	36,000	Barrels/ Day					0	1/month	Estimate																
February	Permit Requirement	Report							1/month	Estimate																
	Sample Measurement	36,000	Barrels/ Day					0	1/month	Estimate																
March	Permit Requirement	Report							1/month	Estimate																
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER FOAM/FLOATING SOLIDS January	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight																
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight																
	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight																
February	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight																
	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight																
March	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight																
	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight																
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight																
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINE UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.						TELEPHONE		DATE																
Steve Liles Vice President, Manager of Operations																										
TYPED OR PRINTED																										
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		 Marla Robertson, HSE Manager						(562) 628-1526		04 22 2014																
								Area Code Number		MONTH/DAY/YEAR																

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From:	14	01	01	To:	14 03 31

NON-CONTACT COOLING WATER (009)
(combined with excess seawater)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Units	Minimum	Monthly Average	Daily Maximum	Units			
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER CHLORINE, January	Sample Measurement				N/A	N/A	mg/L			
	Permit Requirement				N/A	N/A			1/quarter ₂	Grab
February	Sample Measurement				N/A	N/A	mg/L			
	Permit Requirement				N/A	N/A			1/quarter ₂	Grab
March ₂	Sample Measurement				N/A	N/A	mg/L			
	Permit Requirement				0.00583	0.0104			1/quarter ₂	Grab
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER CHEMICAL INVENTORY January - March				See Attachment #2 Chemical Inventory				0	1/month	List
				Report					1/month	List
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PROVIDED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY KNOWLEDGE OF THE PERSON OR PERSONS WHO MADE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1315. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 3 YEARS.				TELEPHONE		DATE		
Steve Lies Vice President, Manager of Operations						(562) 628-1526		04 22 2014		
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT				Area Code		Number		MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Chlorine values reported above are post-dilution per EPA Plumes UM. Chlorine limits are post-dilution as listed in the new permit modified March 1, 2014, Appendix C.

² Permit limits were released in the March 2014 permit modification.

N/A: The required quarterly chlorine sampling will be performed in April.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

019
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

EXCESS CEMENT SLURRY (019)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type	
		Average	Units	Minimum	Average	Maximum	Units				
EXCESS CEMENT SLURRY (019) FLOW VOLUME ₁	Sample Measurement	No Discharge	Monthly								
January - March	Permit Requirement	Report	Average bb/day					1/month	Estimate		
EXCESS CEMENT SLURRY ANNUAL CUMULATIVE VOLUME ₂	Sample Measurement	70	Barrels/Year					0			
03/01/13 - 02/28/14	Permit Requirement	1,200 *									
EXCESS CEMENT SLURRY ANNUAL CUMULATIVE VOLUME ₂	Sample Measurement	0	Barrels/Year					0			
03/01/14 - 02/28/15	Permit Requirement	1,200 *									
EXCESS CEMENT SLURRY SHEEN TEST/FREE OIL FOAM, FLOATING SOLIDS	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge							
January	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water		
	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge							
February	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water		
	Sample Measurement	No discharge	# Days Sheen Observed	No Discharge							
March	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 40 C.F.R. § 101 AND 40 C.F.R. § 101. PERMITTEE UNDER THESE STATUTES MAY INCURE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</small>						TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations								(562) 628-1526		04 22 2014	
TYPED OR PRINTED								Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT		Area Code Number	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ The monthly average flow rates are based on the number of days of discharge (not on the number of days in each month).

² Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

* The total annual cumulative volume limit is a combined limit of excess cement slurry volumes from both Platforms Ellen and Elly, as listed in the permit.

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved Form
OMB No. 2000-0015

CAG280000
PERMIT NO.

006,007,010,011,012,013,014
DISCHARGE NO.

Beta Platform Ellen
LOCATION: 33° 34' 58.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

Blowout Preventer Fluids
Desalination Unit
Ballast/Storage Displacement
Bilge Water
Boiler Blowdown
Test Fluids
Diatomaceous Earth Filter Media

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type						
		Average	Maximum	Units	Minimum	Average	Maximum	Units									
(006) Blowout Preventer Fluids FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge												
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water						
(007) Desalination Unit FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge												
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water						
(010) Ballast/Storage Displacement Water - FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge												
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight						
(011) Bilge Water FLOW RATE January - March	Sample Measurement			Monthly Average bbl/day	No Discharge												
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate						
(012) Boiler Blowdown FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge												
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water						
(013) Test Fluids * FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge												
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight						
(014) Diatomaceous Earth Filter Media FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge												
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR OBTAINING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1916. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.							TELEPHONE	DATE							
Steve Liles Vice President, Manager of Operations									(562) 628-1526	04 22 2014							
TYPED OR PRINTED									Area Code Number	MONTH/DAY/YEAR							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved Form
OMB No. 2000-0015

CAG280000
PERMIT NO.

015, 016, 017, 018, 020, 021
DISCHARGE NO.

Bulk Water Transfer Overflow
Uncontaminated Water
Water Flooding Discharges
Laboratory Wastes (commingled w/ production)
Muds, Cuttings, Cement at Sea
Hydrotest Water

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Units	Minimum	Average	Maximum	Units			
(015) Bulk Transfer Water Overflow FOAM, FLOATING SOLIDS January - March	Sample Measurement Permit Requirement			No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.				0	1/month 1/discharge	Visual Rec. Water
(016) Uncontaminated Water, FOAM, FLOATING SOLIDS January - March	Sample Measurement Permit Requirement			No Discharge No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(017) Water Flooding Discharges FREE OIL, FOAM, FLOATING SOLIDS* January - March	Sample Measurement Permit Requirement			No Discharge No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(018) Laboratory Wastes FREE OIL, FOAM, FLOATING SOLIDS (commingled w/ production) January - March	Sample Measurement Permit Requirement			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.				0	1/month 1/discharge	Visual Rec. Water
(020) Muds, Cuttings, Cement at Sea FLOOR FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement Permit Requirement			No Discharge No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(021) Hydrotest Water FLOW RATE / FREE OIL, FOAM FLOATING SOLIDS January - March	Sample Measurement Permit Requirement		Monthly Average bbl/day	No Discharge No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight
(021) HYDROTEST WATER * CHLORINE January - March	Sample Measurement Permit Requirement				No Discharge N/A	No Discharge N/A	ug/L		1/month 1/discharge	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<p>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. (SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1910). PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</p>				TELEPHONE		DATE		
Steve Liles Vice President, Manager of Operations						(562) 628-1526		04 22 2014		
TYPED OR PRINTED						Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT		Area Code Number		

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Uncontaminated water (excess seawater) is combined with non-contact cooling water (refer to non-contact cooling water discharge 009)

* See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

022
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Ellen
LOCATION: 33° 34' 56.5" LAT., 118° 07' 41.6" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

H2S Gas Processing Waste Water

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
(022) H2S Gas Processing Waste Water FLOW RATE	Sample Measurement			Monthly Average bbl/day							
January - March	Permit Requirement	Report								1/discharge	Estimate
(022) H2S Gas Processing Waste Water FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement				No Discharge						
January - March	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Visual - Daylight
Surfactants, Detergents, Dispersants	Sample Measurement				Minimized			0			
January - March	Permit Requirement				Minimize						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED BASED ON MY BELIEF OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1011. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS)							TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations								(562) 628-1526		04 22 2014	
TYPED OR PRINTED								Area Code Number		MONTH/DAY/YEAR	
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)											

Attachment 2

Chemical Inventory

**ATTACHMENT 2
PLATFORM ELLEN
MISCELLANEOUS DISCHARGES
CHEMICAL INVENTORY
January 1, 2014 through March 31, 2014**

<u>Fluid Type</u>	<u>Volume</u> (Monthly avg bbls per day)	<u>Product Name</u>	<u>Estimated Chemical Quantity</u> (Monthly avg gal per day)	<u>Average End-of-Pipe ¹ Concentration</u> (mg/l)
009 Non-contact Cooling Water (combined with excess seawater)				
January	36,000	Chlorine	0.91	0.6
February	36,000	Chlorine	0.60	0.4
March	36,000	Chlorine	1.06	0.7
008 Fire Control System Water	N / A	None	None	None
013 Test Fluids	No Discharge	No Discharge	None	None
017 Water Flooding Discharges	No Discharge	No Discharge	None	None
021 Hydrotest Water	No Discharge	No Discharge	None	None

¹ Chemical quantity for non-contact cooling water calculated with Operations daily monitoring results using a non-EPA chlorine test method (Hach DPD Color Wheel). The chlorine concentrations are the same for Elly and Ellen since Ellen's seawater pump supplies the non-contact cooling water to Elly.

N / A: Not chlorinated

Platform Eureka

Attachment 1

**EPA DMR
PERMIT NO. CAG280000**

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

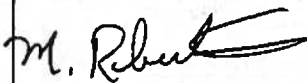
Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD							
YR	MO	DAY	YR	MO	DAY		
From:	14	01	01	To:	14	03	31

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type									
		Average	Maximum	Units	Minimum	Average	Maximum	Units												
DRILLING FLUIDS VOLUME Well # N / A	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
Well # N / A January	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
Well # N / A February	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
Well # N / A March	Sample Measurement		No Discharge	Barrels/ Well																
	Permit Requirement		Report							1/well 1/day	Estimate									
Quarterly Total 01/01/14 - 03/31/14	Sample Measurement		0	Barrels/ Quarter					0											
	Permit Requirement		Report																	
Annual Cumulative Volume Limit, 03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/ Year					0											
	Permit Requirement		36,650																	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 802 18 U.S.C. & 1001 AND 33 U.S.C. & 1318. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 3 YEARS.</small>							TELEPHONE		DATE									
Steve Liles Vice President, Manager of Operations																				
TYPED OR PRINTED																				
		 Marina Robertson, HSE Manager							(562) 628-1526		04 22 2014									
		<small>Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT</small>							Area Code Number		MONTH/DAY/YEAR									

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.
Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type							
		Average	Maximum	Units	Minimum	Average	Maximum	Units										
DRILL CUTTINGS VOLUME Well # N / A	Sample Measurement		No Discharge	Barrels/ Month														
	Permit Requirement		Report							1/well 1/day	Estimate Grab							
Well # N / A February	Sample Measurement		No Discharge	Barrels/ Month						1/well 1/day	Estimate Grab							
	Permit Requirement		Report							1/well 1/day	Estimate Grab							
Well # N / A March	Sample Measurement		No Discharge	Barrels/ Month						1/well 1/day	Estimate Grab							
	Permit Requirement		Report							1/well 1/day	Estimate Grab							
Annual Cumulative Volume Limit 1 03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/ Year					0									
	Permit Requirement		13,350															
DRILL FLUIDS/CUTTINGS FREE OIL January	Sample Measurement				No Discharge			# Days Sheen Observed										
	Permit Requirement				Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual							
February	Sample Measurement				No Discharge			# Days Sheen Observed										
	Permit Requirement				Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual							
March	Sample Measurement				No Discharge			# Days Sheen Observed										
	Permit Requirement				Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED BASED ON MY BELIEF OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 332 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.							TELEPHONE		DATE							
Steve Liles Vice President, Manager of Operations																		
									(562) 628-1526	04 22	2014							
									Marina Robertson, HSE Manager									
									Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT									
									Area Code	Number	MONTH/DAY/YEAR							
TYPED OR PRINTED																		

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

1 Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd, Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
WELL DISCHARGE MONITORING REPORT (Well DMR)

CAG280000
PERMIT NO.

001
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration		NO. EX.	Frequency Analysis	Sample Type							
		Average	Maximum	Units	Maximum	Units										
DRILLING FLUIDS TOXICITY WELL No.	Sample Measurement				N/A	% by Volume										
	Permit Requirement				LC50 > 3% SPP			(0-80%) Well Footage	Grab							
DRILLING FLUIDS TOXICITY WELL No.	Sample Measurement				N/A	% by Volume										
	Permit Requirement				LC50 > 3% SPP			(80-100%) Well Footage	Grab							
BARITE MERCURY	Sample Measurement				N/A	mg / kg										
	Permit Requirement				1 mg / kg			Stock Barite	Grab							
BARITE CADMIUM	Sample Measurement				N/A	mg / kg										
	Permit Requirement				3 mg / kg			Stock Barite	Grab							
DRILL FLUIDS CHEMICAL INVENTORY WELL No.	Sample Measurement				N/A											
	Permit Requirement				Report			Each Mud System								
No. DAYS DISCHARGE FOR EACH DRILLING FLUID	Sample Measurement				N/A											
	Permit Requirement				Report			# Days Each								
PROHIBITED DISCHARGE 1. Oil-based Fluids 2. Diesel Oil 3. Non-aqueous based drilling fluids or cuttings					N/A			N/A								
					No Discharge			N/A								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR OBTAINING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 28 U.S.C. § 1361. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)					TELEPHONE		DATE							
Steve Liles Vice President, Manager of Operations																
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N / A: No discharge of drilling fluids

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

002
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

PRODUCED WATER (002)
(commingled at Platform Elly)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
PRODUCED WATER FLOW RATE (commingled at Platform Elly) January - March	Sample Measurement	No Discharge									
	Permit Requirement									1/day	Estimate
QUARTERLY AVERAGE Volume		No Discharge								1/quarter	Estimate
ANNUAL CUMULATIVE Volume ^{1,2} 03/01/13 - 02/28/14 and 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/Year							
	Permit Requirement		10,950,000								
PRODUCED WATER OIL & GREASE	Sample Measurement					No Discharge	No Discharge	mg/L			
	Permit Requirement					29.0	42.0			1/week	Grab
Enforceable Limits:						N/A	N/A				
PRODUCED WATER QUARTERLY CONSTITUENTS						No Discharge	No Discharge			1/month for 1 year	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY REVIEW OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1004 AND 33 U.S.C. § 1316. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)							TELEPHONE	DATE		
Steve Liles Vice President, Manager of Operations	(562) 628-1526	04 22 2014									
TYPED OR PRINTED	 Marina Robertson, HSE Manager							Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT Area Code Number	MONTH/DAY/YEAR		

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Permit volume limit applies to a combined produced water volume between platforms Eureka, Ellen, and Elly, as listed in the permit (refer to Plt. Elly DMR).

² Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.

Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

003
DISCHARGE NO.

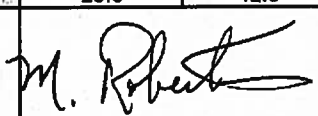
Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

**WELL TREATMENT, COMPLETION
AND WORKOVER FLUIDS (003)**

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type						
		Average	Maximum	Units	Minimum	Average	Maximum				Units					
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS FLOW *	Sample Measurement		No Discharge	Barrels / Job												
	Permit Requirement		Report						1 / job	Estimate						
February	Sample Measurement		No Discharge	Barrels / Job												
	Permit Requirement		Report						1 / job	Estimate						
March	Sample Measurement		No Discharge	Barrels / Job												
	Permit Requirement		Report						1 / job	Estimate						
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS OIL AND GREASE						MONTHLY AVERAGE	DAILY MAXIMUM									
January	Sample Measurement					No Discharge	No Discharge	mg/L								
	Permit Requirement					29.0	42.0		1/job	Grab						
February	Sample Measurement					No Discharge	No Discharge	mg/L								
	Permit Requirement					29.0	42.0		1/job	Grab						
March	Sample Measurement					No Discharge	No Discharge	mg/L								
	Permit Requirement					29.0	42.0		1/job	Grab						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEC 15 U.S.C. & 1001 AND 32 U.S.C. & 1215. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.					TELEPHONE		DATE							
Steve Liles Vice President, Manager of Operations																
TYPED OR PRINTED																
		 Marina Robertson, HSE Manager					(562) 628-1526		04 22 2014							
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

*If present, WTCWFs are commingled with produced water and injected back into the formation.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

003
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

**WELL TREATMENT, COMPLETION
AND WORKOVER FLUIDS (003)**

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS TYPE AND TOTAL NUMBER OF JOBS	Sample Measurement		0	Barrels / Job							
	Permit Requirement		Report								
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS STATIC SHEEN January	Sample Measurement				No Discharge			# Times Sheen Observed			
	Permit Requirement				Negative Static Sheen Test - # Times observed-None				1/discharge	Grab	
February	Sample Measurement				No Discharge			# Times Sheen Observed			
	Permit Requirement				Negative Static Sheen Test - # Times observed-None				1/discharge	Grab	
March	Sample Measurement				No Discharge			# Times Sheen Observed			
	Permit Requirement				Negative Static Sheen Test - # Times observed-None				1/discharge	Grab	
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS Chemical Inventory March	Sample Measurement				N / A				0	1/month	List
	Permit Requirement				Report				1/month	List	
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY KNOWLEDGE OF THE PERSON OR PERSONS WHO MANAGE THIS SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR VIOLATIONS. SEE 16 U.S.C. § 1001 AND 33 U.S.C. § 1319. PERMITTEES UNDER THESE STATUTES MAY INCUR FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.							TELEPHONE	DATE	
Steve Liles Vice President, Manager of Operations											
TYPED OR PRINTED		 Marina Robertson, HSE Manager							(562) 628-1526	04 22 2014	
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code	Number	
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)											

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

004
DISCHARGE NO.

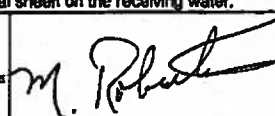
Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

DECK DRAINAGE (004)
(Commingled with rain and fire water to disposal well)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type					
		Average	Units	Minimum	Average	Maximum	Units								
DECK DRAINAGE VOLUME-FLOW RATE ¹ (Commingled with fire water) January	Sample Measurement	No Discharge	Mo. Avg. bbl/day												
	Permit Requirement	Report							1/month	Estimate					
February	Sample Measurement	No Discharge	Mo. Avg. bbl/day												
	Permit Requirement	Report							1/month	Estimate					
March	Sample Measurement	No Discharge	Mo. Avg. bbl/day												
	Permit Requirement	Report							1/month	Estimate					
DECK DRAINAGE FREE OIL January	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight					
February	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight					
March	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge											
	Permit Requirement	No Sheen		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS, SEE 18 U.S.C. § 1501 AND 33 U.S.C. § 1919. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$25,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</small>						TELEPHONE		DATE					
Steve Liles Vice President, Manager of Operations															
TYPED OR PRINTED		 Marina Robertson, HSE Manager						(562) 628-1526		04 22 2014					
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR					

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Deck drains and related rain water are sent to a disposal well and are not discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTE (005)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type							
		Average	Maximum	Units	Minimum	Average	Maximum	Units										
SANITARY WASTE FLOW RATE, January	Sample Measurement	34.0		Monthly Average					0	1/day	Estimate							
	Permit Requirement	Report		bb/day						1/month	Estimate							
February	Sample Measurement	41.0		Monthly Average					0	1/day	Estimate							
	Permit Requirement	Report		bb/day						1/month	Estimate							
March	Sample Measurement	39.0		Monthly Average					0	1/day	Estimate							
	Permit Requirement	Report		bb/day						1/month	Estimate							
SANITARY WASTE FOAM & FLOATING SOLIDS January	Sample Measurement		0	# days observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
February	Sample Measurement		0	# days observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
March	Sample Measurement		0	# days observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight							
	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRULY ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 333 19 U.S.C. § 1001 AND 33 U.S.C. § 1315. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.</small>																
Steve Liles Vice President, Manager of Operations									TELEPHONE		DATE							
TYPED OR PRINTED									(562) 628-1526		04 22 2014							
		 Marina Robertson, HSE Manager							Area Code		MONTH/DAY/YEAR							
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code		MONTH/DAY/YEAR							

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Sanitary includes restroom sinks, showers and toilets.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DA	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTE (005)
(Domestic laundry separate from sanitary)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
SANITARY WASTE RESIDUAL CHLORINE ^{1,2}	Sample Measurement				N/A	N/A	N/A		0		
	Permit Requirement				1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
January	Sample Measurement				N/A	N/A	N/A		0		
	Permit Requirement				1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
February	Sample Measurement				N/A	N/A	N/A		0		
	Permit Requirement				1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
March	Sample Measurement				N/A	N/A	N/A		0		
	Permit Requirement				1 mg/l	N/A	10 mg/l	mg/l		Monthly	Grab
DOMESTIC WASTE (as laundry) FLOW RATE ₃	Sample Measurement	No Discharge		Monthly Average bbl/day						1/month	Estimate
	Permit Requirement	Report									
January	Sample Measurement	No Discharge		Monthly Average bbl/day						1/month	Estimate
	Permit Requirement	Report									
February	Sample Measurement	No Discharge		Monthly Average bbl/day						1/month	Estimate
	Permit Requirement	Report									
March	Sample Measurement	No Discharge		Monthly Average bbl/day						1/month	Estimate
	Permit Requirement	Report									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1001 AND 33 U.S.C. § 1910. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.					TELEPHONE		DATE		
Steve Liles Vice President, Manager of Operations							(562) 628-1526		04 22 2014		
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT					Area Code Number		MONTH/DAY/YEAR		

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ The sewage treatment unit is a marine sanitation device that complies with pollution control standards and regulations under Section 312 of the Clean Water Act. Thus, it is deemed to be in compliance with permit limitations for sanitary waste discharges (as per Condition II.E.1 Footnote 2 of CAG280000). Occasional chlorine tests are performed to ensure proper operation of the device.

² Domestic laundry wastewater is separate and sent to a disposal well. Domestic water from showers and sinks is commingled with sanitary.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

005
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

SANITARY & DOMESTIC WASTE (005)
(Domestic laundry separate from sanitary)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration			NO. EX.	Frequency Analysis	Sample Type											
		Average	Maximum	Units	Minimum	Average	Maximum				Units										
DOMESTIC WASTE (as laundry) FOAM / FLOATING SOLIDS ¹	Sample Measurement		No Discharge	# of Days Observed	No Discharge																
January	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight											
February	Sample Measurement		No Discharge	# of Days Observed	No Discharge																
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight											
March	Sample Measurement		No Discharge	# of Days Observed	No Discharge																
	Permit Requirement		None		No foam or floating solids in the receiving waters.				1/day	Visual - Daylight											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGED THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 20 U.S.C. § 901A. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$50,000 AND/OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)						TELEPHONE		DATE											
Steve Liles Vice President, Manager of Operations										(562) 628-1526		04 22 2014									
TYPED OR PRINTED										Area Code		MONTH/DAY/YEAR									
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code		Number											

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Domestic waste (as laundry) is sent to a disposal well and not discharged. Domestic waste from sinks and showers is reported under Sanitary discharges.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

008
DISCHARGE NO.

Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.35" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

FIRE CONTROL WATER (008)
(deluge commingled with deck drains)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type								
		Average	Units	Minimum	Average	Maximum	Units											
FIRE CONTROL SYSTEM TEST WATER (008) - FOAM, FLOATING SOLIDS ¹ (deluge commingled with deck drains) January	Sample Measurement	No Discharge	# Days Observed	No Discharge														
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight								
February	Sample Measurement	No Discharge	# Days Observed	No Discharge														
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight								
March	Sample Measurement	No Discharge	# Days Observed	No Discharge														
	Permit Requirement	None		No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/day	Visual - Daylight								
FIRE CONTROL SYSTEM TEST WATER (008) CHLORINE ² January - March	Sample Measurement				Monthly Average	Daily Maximum												
	Permit Requirement				N/A	N/A	mg/L		1/month	Grab								
FIRE CONTROL SYSTEM TEST WATER Chemical Inventory ² January - March	Sample Measurement			N/A					1/month	List								
	Permit Requirement			Report					1/month	List								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED BASED ON MY ASSESSMENT OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 19 U.S.C. § 1201 AND 22 U.S.C. § 1591. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$1,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)</small>						TELEPHONE		DATE								
Steve Liles Vice President, Manager of Operations									(562) 628-1526		04 22 2014							
TYPED OR PRINTED																		
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR								

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Fire water is commingled with deck drains and sent to a disposal well and is not discharged.

² Fire water is not chlorinated or chemically treated.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NON-CONTACT COOLING WATER (009)
(combined with excess seawater)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type					
		Average	Units	Minimum	Average	Maximum	Units								
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER FLOW VOLUME January	Sample Measurement	68,571	Barrels/Day					0	1/month	Estimate					
	Permit Requirement	Report							1/month	Estimate					
February	Sample Measurement	68,571	Barrels/Day					0	1/month	Estimate					
	Permit Requirement	Report							1/month	Estimate					
March	Sample Measurement	68,571	Barrels/Day					0	1/month	Estimate					
	Permit Requirement	Report							1/month	Estimate					
NON-CONTACT COOLING WATER (009) COMBINED with EXCESS SEAWATER FOAM/FLOATING SOLIDS January	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
February	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
March	Sample Measurement	0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight					
	Permit Requirement	None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR OBTAINING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1051 AND 16 U.S.C. § 1011. (OFFICER UNDER THESE STATUTES MAY INCLUDE FINE UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 3 MONTHS AND 5 YEARS)						TELEPHONE		DATE					
Steve Liles Vice President, Manager of Operations															
TYPED OR PRINTED		 Marina Robertson, HSE Manager						(562) 628-1526		04 22 2014					
		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR					

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

009
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NON-CONTACT COOLING WATER (009)
(combined with excess seawater)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type	
		Average	Units	Minimum	Monthly Average	Daily Maximum	Units				
NON-CONTACT COOLING WATER (009) COMBINED WITH EXCESS SEAWATER CHLORINE ¹ January	Sample Measurement				N/A	N/A	mg/L				
	Permit Requirement				N/A	N/A			1/quarter	Grab	
February	Sample Measurement				N/A	N/A	mg/L				
	Permit Requirement				N/A	N/A			1/quarter	Grab	
March ²	Sample Measurement				N/A	N/A	mg/L				
	Permit Requirement				0.00585	0.0102			1/quarter	Grab	
NON-CONTACT COOLING WATER (009) COMBINED WITH EXCESS SEAWATER CHEMICAL INVENTORY January - March	Sample Measurement			See Attachment #2 Chemical Inventory				0	1/quarter	List	
	Permit Requirement			Report					1/quarter	List	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY TRAINED AND QUALIFIED, THE INFORMATION SUBMITTED BASED ON MY REVIEW OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1051 AND 33 U.S.C. § 1915. VIOLATIONS UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.</small>						TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations											
		 Marina Robertson, HSE Manager						(562) 628-1526		04 22 2014	
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT						Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Chlorine values reported above are post-dilution per EPA Plumes UM. Chlorine limits are post-dilution as listed in the new permit modified March 1, 2014, Appendix C.

² Permit limits were released in the March 2014 permit modification.

N/A: The required quarterly chlorine sampling will be performed in April.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

019
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

EXCESS CEMENT SLURRY (019)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Units	Minimum	Average	Maximum	Units			
EXCESS CEMENT SLURRY (019) FLOW VOLUME	Sample Measurement	No Discharge	Monthly Average bbl/day							
	Permit Requirement	Report						1/month	Estimate	
January	Sample Measurement	No Discharge	Monthly Average bbl/day							
	Permit Requirement	Report						1/month	Estimate	
February	Sample Measurement	No Discharge	Monthly Average bbl/day							
	Permit Requirement	Report						1/month	Estimate	
March	Sample Measurement	No Discharge	Monthly Average bbl/day							
	Permit Requirement	Report						1/month	Estimate	
EXCESS CEMENT SLURRY ANNUAL CUMULATIVE VOLUME ¹	Sample Measurement	0	Barrels/Year					0		
	Permit Requirement	1,200						1/year	Estimate	
03/01/13 - 02/28/14 and 03/01/14 - 02/28/15 EXCESS CEMENT SLURRY SHEEN TEST/FREE OIL FOAM, FLOATING SOLIDS January	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge						
	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water	
February	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge						
	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water	
March	Sample Measurement	No Discharge	# Days Sheen Observed	No Discharge						
	Permit Requirement	None		No foam or floating solids No Oil				1/well 1/day	Visual Rec. Water	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY OBTAIN AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INDUSTRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1918. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS)</small>						TELEPHONE	DATE	
Steve Liles Vice President, Manager of Operations							(562) 628-1526	04 22 2014		
TYPED OR PRINTED							Area Code Number	MONTH/DAY/YEAR		
		 Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT								

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

¹ Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2013 through February 2014, and March 2014 through February 2015.
Due to the new permit, this DMR includes the first month of the new annual cumulative volume period. Therefore, annual cumulative volumes for two separate periods are recorded.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved Form
OMB No. 2000-0015


CAG280000 006,007,010,011,012,013,014
PERMIT NO. DISCHARGE NO.

Blowout Preventer Fluids
Desalination Unit
Ballast/Storage Displacement
Bilge Water
Boiler Blowdown
Test Fluids
Diatomaceous Earth Filter Media

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type	
		Average	Maximum	Units	Minimum	Average	Maximum	Units				
(006) Blowout Preventer Fluids FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge							
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water	
(007) Desalination Unit FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge							
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water	
(010) Ballast/Storage Displacement Water - FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge							
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight	
(011) Bilge Water FLOW RATE January - March	Sample Measurement			Monthly Average bbl/day	No Discharge							
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate	
(012) Boiler Blowdown FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge							
	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water	
(013) Test Fluids * FLOW RATE FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement			Monthly Average bbl/day	No Discharge							
	Permit Requirement	Report			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight	
(014) Diatomaceous Earth Filter Media FREE OIL, FOAM, FLOATING SOLIDS January - March	Sample Measurement				No Discharge							
	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL, PROPERLY TRAINED AND EVALUATED, HAVE GATHERED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 16 U.S.C. § 1001 AND 18 U.S.C. § 1011. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)							TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations		 Marina Robertson, HSE Manager							(562) 628-1526		04 22 2014	
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT							Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

*See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000	015, 016, 017, 018, 020, 021
PERMIT NO.	DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Bulk Water Transfer Overflow
Uncontaminated Water
Water Flooding Discharges
Laboratory Wastes (commingled with deck drains)
Muds, Cuttings, Cement at Sea
Hydrotest Water

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading		Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type	
		Average	Units	Minimum	Average	Maximum	Units				
(015) Bulk Transfer Water Overflow FOAM, FLOATING SOLIDS	Sample Measurement			No floating solids in the receiving water.				0	1/month	Visual	
	Permit Requirement			No foam, in other than trace amounts, in the receiving water.					1/discharge	Rec. Water	
January - March				No floating solids in the receiving water.					1/month	Visual	
(016) Uncontaminated Water ¹ FOAM, FLOATING SOLIDS	Sample Measurement			No floating solids in the receiving water.				0	1/month	Visual	
	Permit Requirement			No foam, in other than trace amounts, in the receiving water.					1/discharge	Rec. Water	
January - March				No floating solids in the receiving water.					1/month	Visual	
(017) Water Flooding Discharges FREE OIL, FOAM, FLOATING SOLIDS*	Sample Measurement			No Discharge					1/month	Visual	
	Permit Requirement			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Rec. Water	
January - March				No Discharge					1/month	Visual	
(018) Laboratory Wastes FREE OIL, FOAM, FLOATING SOLIDS (commingled with deck drains)	Sample Measurement			No Discharge					1/month	Visual	
	Permit Requirement			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Rec. Water	
January - March				No Discharge					1/month	Visual	
(020) Muds, Cuttings, Cement at Sea FLOOR FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement			No Discharge					1/month	Visual	
	Permit Requirement			No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Rec. Water	
January - March				No Discharge					1/month	Visual	
(021) Hydrotest Water ² FLOW RATE / FREE OIL, FOAM FLOATING SOLIDS	Sample Measurement		Monthly Average bbl/day	No Discharge					1/month	Estimate / Visual Daylight	
	Permit Requirement	Report		No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge		
January - March				No Discharge					1/month	Estimate / Visual Daylight	
(021) HYDROTEST WATER CHLORINE	Sample Measurement			No Discharge		No Discharge		ug/L	1/month 1/discharge	Grab	
	Permit Requirement			N/A		N/A					
January - March				N/A		N/A					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MADE THIS SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. (SEE 18 U.S.C. § 1001 AND 28 U.S.C. § 1345. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$500,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 5 MONTHS AND 5 YEARS.)						TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations								(562) 628-1526		04 22 2014	
TYPED OR PRINTED								Area Code		MONTH/DAY/YEAR	
COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)		Signature of PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Marina Robertson, HSE Manager						Area Code		MONTH/DAY/YEAR	

¹ Uncontaminated water is combined with non-contact cooling water (refer to non-contact cooling water discharge 009)

*See Chemical Inventory, if discharged.

Beta Offshore
111 W. Ocean Blvd. Suite 1240
Long Beach, Ca 90802

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

CAG280000
PERMIT NO.

022
DISCHARGE NO.


Approved Form
OMB No. 2000-0015

Beta Platform Eureka
LOCATION: 33° 33' 49.61" LAT., 118° 06' 59.38" LONG.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14 01 01			To: 14 03 31		

H2S Gas Processing Waste Water

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type	
		Average	Maximum	Units	Minimum	Average	Maximum	Units				
(022) H2S Gas Processing Waste Water FLOW RATE	Sample Measurement			Monthly Average bbl/day								
January - March	Permit Requirement	Report							1/discharge	Estimate		
(022) H2S Gas Processing Waste Water FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement				No Discharge							
January - March	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.				1/discharge	Visual - Daylight		
Surfactants, Detergents, Dispersants	Sample Measurement				Minimized			0				
	Permit Requirement				Minimize							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 15 U.S.C. § 1004 AND 33 U.S.C. § 1319. PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS.							TELEPHONE		DATE	
Steve Liles Vice President, Manager of Operations									(562) 628-1526		04 22 2014	
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT  Marina Robertson, HSE Manager							Area Code Number		MONTH/DAY/YEAR	

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Attachment 2

Chemical Inventory

**ATTACHMENT 2
PLATFORM EUREKA
MISCELLANEOUS DISCHARGES
CHEMICAL INVENTORY
January 1, 2014 through March 31, 2014**

<u>Fluid Type</u>	<u>Volume</u> (Monthly avg bbls per day)	<u>Product Name</u>	<u>Estimated Chemical Quantity</u> (Monthly avg gal per day)	<u>Average End-of-Pipe ¹ Concentration</u> (mg/l)
009 Non-contact Cooling Water (combined with excess seawater)				
January	68,571	Chlorine	0.86	0.3
February	68,571	Chlorine	0.58	0.2
March	68,571	Chlorine	< 0.14	< 0.05
008 Fire Control System Water	N / A	None	N / A	N / A
013 Test Fluids	No Discharge	No Discharge	None	None
017 Water Flooding Discharges	No Discharge	No Discharge	None	None
021 Hydrotest Water	No Discharge	No Discharge	None	None

¹ Chemical quantity for non-contact cooling water calculated with Operations monitoring results using a non-EPA chlorine test method (Hach DPD Color Wheel).

N / A: Not chlorinated.

